(IN)VISIBLE MINORITIES IN CANADIAN HEALTH DATA AND RESEARCH: A SCOPING REVIEW OF THE LITERATURE

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ACKNOWLEDGMENTS

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Why is this Research Important?

Significant increase in Canada’s visible minority population in the past decade (Statistics Canada, 2013)
Why is this Research Important? Relevance to an Aging Population

Increase in the Visible Minority Older Adult (VMOA) population in Canada
WHAT WE NEED TO KNOW

- Are visible minority Canadians healthier or less healthy than their white counterparts?

- Do risk factors for health conditions differ for visible minority and white Canadians?

- How do different visible minority groups compare with one another on health outcomes and measures?
RESEARCH QUESTION

“Are Visible Minorities In Invisible In Canadian Health Data and Research?”

Source: National Post, 2014
METHODOLOGY

Scoping Review to address specific questions on:

1. The mortality and morbidity patterns of visible minorities relative to white Canadians
2. The determinants of visible minority health
3. The health status of VMOA
4. Promising datasets
### TABLE I

<table>
<thead>
<tr>
<th>Description of Studies</th>
<th>Number of Studies (N)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Studies that focus on some aspect of health of visible minorities compared with whites, using national data</td>
<td>5</td>
</tr>
<tr>
<td>Studies that focus on some aspect of health of visible minorities, using provincial/local data</td>
<td>35</td>
</tr>
<tr>
<td>Studies that focus only on health of immigrant visible minorities</td>
<td>40</td>
</tr>
<tr>
<td>Studies with separate analysis of immigrant visible minorities and Canadian-born visible minorities</td>
<td>2</td>
</tr>
<tr>
<td>Studies that focus on some aspect of health of visible minority older adults compared with white older adults</td>
<td>2</td>
</tr>
<tr>
<td>Studies that focus only on health of immigrant visible minority older adults</td>
<td>9</td>
</tr>
<tr>
<td>Other publications</td>
<td>6</td>
</tr>
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</table>
TABLE 2

<table>
<thead>
<tr>
<th>Total number of studies</th>
<th>Diabetes</th>
<th>Hypertension and Heart Disease</th>
<th>Mental health</th>
<th>Mortality</th>
<th>Cancer</th>
</tr>
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<tbody>
<tr>
<td>All Visible Minorities</td>
<td>14</td>
<td>- +</td>
<td>++</td>
<td>+ -</td>
<td>+ + + +</td>
</tr>
<tr>
<td>Select visible minority populations:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chinese</td>
<td>7</td>
<td>- -</td>
<td>+ + -</td>
<td>+ -</td>
<td>- - +</td>
</tr>
<tr>
<td>Black</td>
<td>5</td>
<td>-</td>
<td>- - +</td>
<td>+</td>
<td>- -</td>
</tr>
<tr>
<td>South Asian</td>
<td>12</td>
<td>- -</td>
<td>- - - =</td>
<td>+ + -</td>
<td>- = -</td>
</tr>
<tr>
<td>Select visible minority populations, as approximated by country/region of birth for foreign-born persons.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(all) Non-European</td>
<td>15</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>China</td>
<td>6</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>South Asia</td>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>East Asia</td>
<td>1</td>
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<tr>
<td>Africa</td>
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</tbody>
</table>
Data Sources

FIGURE 1

CCHS 14
Census 13
Provincial Surveys 6
Local surveys 8
NPHS 9
LSiC 12
Qualitative 11
Others 26
FINDINGS

- Major gap in health data and research on visible minorities in Canada
- Many studies failed to distinguish between immigrants and Canadian-born visible minorities
- “Visible minorities” often treated as a monolithic category
- The visible minority older adult population is even more invisible in health data and research.
- The most promising dataset appears to be the Canadian Community Health Survey (CCHS).
- Limited research on discrimination as an important social determinant of health *
RECOMMENDATIONS

1. Data Needs:
   - Oversampling visible minorities in standard health surveys such as the CCHS, or conducting targeted health surveys of visible minorities.
   - Surveys should collect information on key socio-demographic characteristics such as nativity, ethnic origin, socioeconomic status, and age-at-arrival for immigrants.

2. Research Needs:
   - Researchers could consider an intersectionality approach in their analyses.
CURRENT RESEARCH

- **OBJECTIVE:** To examine the relationship between discrimination and health, i.e., chronic conditions and self-reported mental health, among VM and white older adults

- Analysis of 2013 CCHS-D data – Rapid Response Module on Discrimination

- Preliminary Findings
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